|           |   |                    | U.S. Department of Justice<br>Office of the United States Trustee<br>Region 2 |                                      |   | stee        |  |
|-----------|---|--------------------|---|--------------------------------------|---|-------------|--|
|           |   |                    |   | Eastern District of New York         |   |             |  |
| IN RE:    | Etienne Estates at Washington LLC } } }   |                    |   | CHAPTER 11<br>CASE NO. 114.40786.NHL |   |             |  |
|           | DEBTOR.   | }                  |   |                                      |   |             |  |
|           |   |                    |   |                                      | unity and a state of the state | nce with t  |  |
|           |   |                    |   | at I bassa sa                        |   | # t         |  |
| report an | Annae with 28 U.S.C. Section 1746, I declare a d it is trate and correct to the best of my kno  Nohanna Francis  Print Name  Managing Director  Title | under penalty of p | erjury m  | Date:                                | April 2nd, 2018   | ned in this |  |
|           | Debtor's Address<br>and Phone Number:<br>301 Washington Avenue<br>Brooklyn, New York 11205  |                    |   |                                      | Attorney's Address<br>and Phone Number:<br>1501 Broadway #22<br>#22   |             |  |

Note: The original Monthly Operating Report is to be filed with the Court and a copy simultaneously provided to the United States Trustee. Monthly Operating Reports must be filed by the 20th day of the following month.

Tel.718.857.8052

New York, New York 10036 Tel.212.221.5700 MONTHLY OPERATING REPORT - POST CONFIRMATION

**ATTACHMENT NO. 2** 

85.04

## CHAPTER 11 POST-CONFIRMATION SCHEDULE OF RECEIPTS AND DISBURSEMENTS

Case Name: Etienne Estates at Washington LLC

Case Number: 114.40786.NHL

1. CASH (End of Period)

Date of Plan Confirmation: 05.11.17

|    |   | Quarter | ly (Jan to March 2018) | Post Confirmation Total |            |
|----|---|---------|------------------------|-------------------------|------------|
| 1. | CASH (Beginning of Period)  | \$      | 85.04                  | \$                      | 85.04      |
| 2. | INCOME or RECEIPTS during the Period  | S       | 39,808.42              | \$                      | 235,571.67 |
| 3. | DISBURSEMENTS   |         |                        |                         |            |
|    | a. Operating Expenses (Fees/Taxes):   |         |                        |                         |            |
|    | (i) U.S. Trustee Quarterly Fees (ii) Federal Taxes                          | \$      | 325.00                 | S                       | 1,300.00   |
|    | (iii) State Taxes   |         |                        |                         |            |
|    | (iv) Other Taxes  |         |                        | \$                      | 10,401.00  |
|    | b. All Other Operating Expenses:  | \$      | 39,483.42              | \$                      | 173,870.67 |
|    | c. Plan Payments:*  |         |                        |                         |            |
|    | (i) Administrative Claims   |         |                        | \$                      | 20,000.00  |
|    | (ii) Class One<br>(iii) Class Two   |         |                        |                         |            |
|    | (iv) Class Three  |         |                        | \$                      | 30,000.00  |
|    | (v) Class Four  |         |                        |                         |            |
|    | (Attach additional pages as needed)  Total Disbursements (Operating & Plan) | s       | 39.808.42              | \$                      | 235,571.67 |

85.04

<sup>\*</sup> This includes any and all disbursements made under the plan of reorganization or in the ordinary course of the reorganized debtor's post-confirmation business, whether the disbursements are made through a trust, by a third party, or by the reorganized debtor.